

Broomhill Breakfast / Afterschool Club Registration and Medical Form

Child's full name	
Name to be known by	
Child's Base	
Address	
Parent contact email	
Parent / Guardian name(s)	1) 2)
Contact 1	
Address if different from child's	
Contact telephone numbers	Home Mobile Work
Contact 2	
Address if different from child's	
Contact telephone numbers	Home Mobile Work
Additional person(s) authorised to collect child Name and contact no.	
*Password to be used *	

Medical Information

Details of Child's doctor						
Name, address and telephone number						
Does your child have any medical problems or disabilities? If yes please state						
Details of any medication your child will need to have available, e.g. inhalers						
Does your child have any known allergies? If yes please state						
Any other relevant information you wish to provide						
Parental Consent			Yes	No		
I consent to any emergency medical treatment necessary during attendance at Breakfast and Teatime Clubs						
I authorise club staff to sign any written consent forms required by the hospital authorities if any delay in getting consent is considered by the doctor to endanger my child's life						
I give consent for my child to be taken out of school grounds for visits and outings with club staff if given prior notice						

Booking information - Permanent Sessions									
	Charges	Mon	Tue	Wed	Thur	*Fri			
	_	3-6pm	3-6pm	3-6pm	3-6pm	3-5pm			
Breakfast	£4.50 per								
7.30 - 8.50am	session								
Teatime *	£10.00 per								
3.00 - 6.00pm	session								
Casual Teatime Sessions are charged at £11									

Any queries please contact Catherine Timbers or Seraphina Ball on 2660936 or email sball@broomhill.sheffield.sch.uk